L21060479521

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	08/08/2022	
Name:	Greg Pintacuda	
Reference #	f:1759862	-
	e:E-HAMM	ERTIME, LLC
	es of Incorporation/Authorization	
☐ Amer	ndment	
Chan	nge of Agent	
☐ Reins	statement	
☐ Conv	version	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ious Name	
✓ Other	r Please provide	a certified copy apon filing
Authorized A	Amount: \$55	
oignatuie	1 XI 77 2	

F: 800.944.6607

COVER LETTER

	istration Section ision of Corporations					
SUBJECT:	E-Hammertime, LLC					
seismer.	Name of Limited Liability Company					
Dear Sir or l	Madam:					
The enclose	d Registered Agent/Registered C	Office Change and	I fee(s) are submitted for filing.			
Please returi	n all correspondence concerning	this matter to the	following:			
Kirstin Elzer						
	Name of Person		_			
c/o Katten M	uchin Rosenman LLP					
	Firm/Company					
525 W. Moni	roe Street, Suite 1900					
	Address					
Chicago, IL (60661					
	City/State and Zip Code					
kirstin.elzer@)katten.com					
E-mail	address: (to be used for future a	nnual report noti	ication)			
For further i	nformation concerning this matte	er, please call:				
Kirstin Elzer		312 at (577-8507			
	Name of Person	ar (Area Code & Daytime Telephone Number			
Reg Div P.O	iling Address: distration Section dision of Corporations dispersion Box 6327 dahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enc	losed is a check for the following	ng amount:				
□ \$	25 Filing Fee	■ \$	55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: E-Hammertime,	LLC					
2. (a)		(I	b)				
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of (Note: MAY I	of limited lia	bility co	mpany:
	4490 Player Street		4490 I	Player Street			
	Hollywood, FL 33021		Hollyv	wood, FL 33021			
	11/09/2021		L21000	0479521			
3.	Date of filing/registration in Florida	- 4.		Document nu	ımber		
5. (a)	Therrel Baisden LLP						
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of	State:			
	One S.E. 3rd Ave Ste 2950						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>				
					(0	~	
	Miami FI	33131			TAAL HACH	202 2 A UG	~ }_ I
(b)	Marc Z. Hammerman				JS-8 AM JAHASSE	1	CHETTOTAL CLAMB IN
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				ΩΩ 21Ω		
	4490 Player Street				E STA	# 5 8: 5	
	NEW Registered Office Address:						
	Hallingand	22021					
	Hollywood, FI	33021					
change agent v was/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registere ability co of the lim limited l	ed office impany, nited liab liability	and the business it is hereby confi- pility company or	office of t rmed that t	he regi	istered nge(s)
// D	utre of a member or authorized representative of a member	- igor	Chern	Printed or typed	I name of sig	nce	
I here provis the obtone to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	ree to act perform d for in C hereby co	in this cance of the Chapter on the Chapter on the Chapter on the Chapter the	capacity. I furthe	r agree to	comply	with the md accept eing filed is been
SHEURIL MARY	Z. Bassetraan.						